



STATE OF NEW HAMPSHIRE DEPARTMENT OF SAFETY

Richard M. Flynn, Commissioner



Division of Fire Safety
Office of the State Fire Marshal
J. William Degnan, State Fire Marshal
Bureau of Electrical Safety and Licensing

Office: 2 Industrial Park Drive, Building 2, Concord, NH

Mailing Address: 33 Hazen Drive, Concord, N.H. 03305

603-271-3748, FAX 603-271-2257

INVESTIGATION REQUEST FORM

Please print. Answer as many questions as possible.

INVESTIGATION REQUESTED BY:

DATE: _____

NAME: _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE NUMBER: (WORK) _____ **(HOME)** _____

PERSON OR COMPANY PERFORMING WORK: _____

STREET: _____

CITY: _____ **STATE:** _____ **ZIP CODE:** _____

TELEPHONE NUMBER: (WORK) _____ **(HOME)** _____

LICENSED OR UNLICENSED? _____

LOCATION OF JOB: _____

(Street)

(City/Town)

(Zip Code)

WAS THE JOB COMPLETED? _____ **IF NO PLEASE EXPLAIN ON BACK.**

DATE JOB WAS STARTED: _____ **WAS PERMIT OBTAINED?** _____

WAS JOB INSPECTED BY LOCAL AUTHORITY? _____ **APPROVED?** _____

NAME OF PERSON WHO INSPECTED THE JOB: _____

PLEASE STATE THE REASON FOR REQUESTING AN INVESTIGATION ON THE REVERSE SIDE OF THIS FORM.

BRIEFLY STATE THE FACTS below and attach COPIES of any contracts, bills of sale, guarantees, etc. Return this form and the documents to:

BUREAU OF ELECTRICAL SAFETY AND LICENSING

33 Hazen Drive
Concord, New Hampshire 03305

[illegible]

To the best of my knowledge the above statements are factual and true.

Signature: _____ **Date:** _____